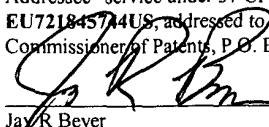


**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**CERTIFICATE OF EXPRESS MAILING**

I hereby certify that this paper and the documents and/or fees referred to as attached therein are being deposited with the United States Postal Service on **September 17, 2003** in an envelope as "Express Mail Post Office to Addressee" service under 37 CFR § 1.10, Mailing Label Number **EU721845744US**, addressed to the Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
\_\_\_\_\_  
Jay R Beyer

Attorney Docket No.: **MAT-4**

First Named Inventor: **Rene George**

**EU 721845744 US**

**UTILITY PATENT APPLICATION TRANSMITTAL (37 CFR § 1.53(b))**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Duplicate for fee processing

Sir: This is a request for filing a patent application under 37 CFR. § 1.53(b) in the name of inventors:  
**Rene George, John Zajac, Daniel J. Devine, Craig Ranft, and Andreas Kadavanich**

For: **PHOTORESIST IMPLANT CRUST REMOVAL**

16934 U.S. PTO  
10/665267  
09/17/03  


Application Elements:

- 19 Pages of Specification, Claims and Abstract
- 3 Sheets of **informal** Drawings
- 6 Pages Combined Declaration and Power of Attorney

Accompanying Application Parts:

- Assignment and Assignment Recordation Cover Sheet (recording fee of \$80.00 enclosed)
- 37 CFR 3.73(b) Statement by Assignee
- Information Disclosure Statement with Form PTO-1449
  - Copies of IDS Citations
- Preliminary Amendment
- Return Receipt Postcard
- This Application does qualify for Small Entity Status
- Other: Nonpublication Request

Fee Calculation (37 CFR § 1.16)

	(Col. 1)(Col. 2)	<u>SMALL ENTITY</u>	<u>OR</u>	<u>LARGE ENTITY</u>	
	<u>NO. FILED</u>	<u>NO. EXTRA</u>	<u>RATE</u>	<u>RATE</u>	<u>FEE</u>
BASIC FEE			\$375	\$	
TOTAL CLAIMS	<u>80</u>	<u>-20 = 60</u>	x9 = \$	OR	\$ 750
INDEP CLAIMS	<u>14</u>	<u>-03 = 11</u>	x42 = \$	OR	x18 = \$ 1080
[ ] Multiple Dependent Claim Presented			\$140 = \$	OR	x84 = \$ 924
* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.		Total	\$	OR	\$280 = \$
					Total \$ 2754

Check No. \_\_\_\_\_ in the amount of \$\_\_\_\_\_ is enclosed.

Please charge Deposit Account No. 19-1685 (Order No. MAT-4) in the amount of \$2834.00 to cover the filing fee and assignment recordation fee.

The Commissioner is authorized to charge any fees beyond the amount enclosed which may be required, or to credit any overpayment, to Deposit Account No. 19-1685 (Order No. MAT-4).

General Authorization for Petition for Extension of Time (37 CFR §1.136)

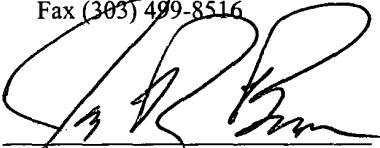
Applicants hereby make and generally authorize any Petitions for Extensions of Time as may be needed for any subsequent filings. The Commissioner is also authorized to charge any extension fees under 37 CFR §1.17 as may be needed, to Deposit Account No. 19-1685 (Order No MAT-4).

Please send all correspondence addressed to the address associated with the following Customer Number:

**Customer Number 21833**

Date: September 17, 2003

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